

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
10/540,294

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		1				
4		3				
5		3				
6		3				
7		①				
8		①				
9		①				
10		①				
11		①				
12	1					
13		1				
14		1				
15		1				
16		1				
17		1				
18		1				
19		1				
20	1					
21	1	1				
22	1	1				
23		3				
24		3				
25		②				
26		①				
27		①				
28		①				
29		①				
30	1					
31	1					
32		1				
33	2					
34	2					
35	①					
36	①					
37	①					
38	①					
39	①					
40	1					
41	1	1				
42		1				
43	3					
44	3					
45	3					
46	3					
47	3					
48	①					
49	①					
50	①					
TOTAL IND.		↓		↓		↓
TOTAL DEP.	←		←		←	
TOTAL CLAIMS	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51	0					
52	0	0				
53	0					
54						
55						
56						
57						
58						
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60						
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94						
95						
96						
97						
98						
99						
100						
TOTAL IND.	7	↓		↓		↓
TOTAL DEP.	68	←		←		←
TOTAL CLAIMS	75	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

U.S. DEPARTMENT OF COMMERCE

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